



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER OF PATENTS AND TRADEMARKS  
Washington, D.C. 20231  
www.uspto.gov

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/917,329	07/30/2001	Laszlo Gyorgy Schwartz		1242

28668 7590 06/07/2002

LASZLO G. SCHWARTZ  
8177 GLADES ROAD #16  
BOCA RATON, FL 33434

EXAMINER

SILBERMANN, JOANNE

ART UNIT	PAPER NUMBER
----------	--------------

3611

DATE MAILED: 06/07/2002

Please find below and/or attached an Office communication concerning this application or proceeding.

DRAWING

ART UNIT      PAPER MAIL

DATE MAILED:

## NOTICE OF INSUFFICIENT FILING FEES

APPLICANT IS GIVEN 30 DAYS FROM THE DATE OF MAILING OF THIS NOTICE WITH WHICH TO SUBMIT THE BALANCE DUE. Extension of this 30 day period under CFR 1.136(a) will not be permitted. Failure to respond within this period will result in the application becoming abandoned. 35 U.S.C. 133.

The filing fees submitted in connection with this application are insufficient. See the attached Patent Application-Fee Determination Rec (Form PTO-875). The balance due for additional claims and/or multiple dependant claims is summarized below:

☐ A. Filing fees due upon filing the application

Total Filing Fees Due	= \$ <u>435.00</u>
Less Filing Fees Submitted	- \$ <u>(355.00)</u>
BALANCE DUE	= \$ <u>80.00</u>

☐ B. Fees due in connection with the amendment filed on \_\_\_\_\_

Total Fees Due	= \$ _____
Less Fees Submitted	- \$ <u>( )</u>
BALANCE DUE	= \$ _____

ATTACHMENT: FORM PTO-875

\_\_\_\_\_  
Clerk of Group

APPLICANT: PLEASE COMPLETE THIS PORTION AND RETURN THIS NOTICE WITH PAYM

Fee submitted \$ \_\_\_\_\_ Signature \_\_\_\_\_

### CERTIFICATE OF MAILING

I hereby certify that this notice and the required additional fee are being deposited with the U.S. POSTAL SERVICE as first class mail in an envelope addressed to:  
Commissioner of Patents and Trademarks, Washington, D.C. 20531, on (date) \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_